ASSOCIATION OF RESEARCH LIBRARIES

April 24, 2023

NIH Office of Science Policy
6705 Rockledge Drive, Suite 630
Bethesda, MD 20892

Re: Request for Information on the NIH Plan to Enhance Public Access to the Results of NIH-Supported Research (NOT-OD-23-091)

On behalf of the members of the Association of Research Libraries (ARL), thank you for the opportunity to provide comments on the National Institutes of Health (NIH) "Plan to Enhance Public Access to the Results of NIH-Supported Research." We applaud NIH for its leadership in public access, specifically its investment in PubMed Central (PMC) and the recently implemented "NIH Policy for Data Management and Sharing." ARL and its members are committed to the advancement of open scholarship and open access to accelerate scientific and medical advances and to expand diverse, public participation in federally funded research. We appreciate NIH's commitment to making the results of federally funded research widely available without embargo, leveraging persistent identifiers to support scientific integrity, and ensuring equitable access.

Decisions made by NIH, one of the world's largest funders of scientific research, will influence the entire scholarly publishing ecosystem, with implications for researchers globally. ARL recommends that NIH consider the far-reaching, global impact of its policy implementation with regard to non-NIH-funded researchers in addition to those funded by NIH.

While the "NIH Plan to Enhance Public Access to the Results of NIH-Supported Research" covers publications, data, and other research outputs, our recommendations below focus primarily on publications. ARL has submitted prior comments[1] and work on behalf of its members with regard to the "NIH Policy for Data Management and Sharing."

---

[1] "ARL Comments on Draft NIH Policy for Data Management and Sharing," Association of Research Libraries, January 9, 2020; "ARL Comments on Draft Genomic Data Management and Sharing Policy," Association of Research Libraries, March 9, 2022; *Institutional Strategies for the NIH Data Management and Sharing Policy: Infrastructure, Policies, and Services*, Association of Academic Health Science Libraries, Association of American Medical Colleges, Association of Research Libraries, September 2022.

We submit the following comments on the "NIH Plan to Enhance Public Access to the Results of NIH-Supported Research."

1. **How to best ensure equity in publication opportunities for NIH-supported investigators**

   The Association of Research Libraries appreciates the framing of "publication opportunities," recognizing both publishing and access to publishing as equity issues, and recommends that NIH:

   - Clarify for investigators that there is no charge for manuscript deposit into PMC, and that publishing charges by journals are not public-access compliance fees
   - Work with research institutions, their libraries, and their professional associations on coordinated education to investigators on their options for cost-free manuscript deposit

   - Continue partnerships and experimentations with preprint services (such as the NIH Preprint Pilot) to accelerate sharing of research findings, including assigning PMC IDs to peer-reviewed preprints, and recognizing peer-reviewed preprints that are substantially similar to author-accepted manuscripts for the purposes of compliance with the policy

   If a researcher chooses to accept funding from NIH or other federal R&D agencies, they must agree to grant the funding agency a nonexclusive license to their scholarly outputs funded by the grant. In this scenario, the researcher retains their copyright, unless and until they assign it to another party, such as a publisher. According to the August 2022 Nelson memo,[2] agency policies must describe the prerequisites needed to make publications freely and publicly available by default, including reuse rights and attribution, which has implications for the type of license that the researcher may use. Retaining copyright enables researchers to make those license choices.

   ARL recommends that NIH:

   - Provide rights-retention language (for investigators to use upon submission of manuscripts to journals) that encourages authors to retain their copyrights and assign a Creative Commons Attribution (CC BY) or similar license to their work in order to enable full reuse rights. Open licenses are easy to understand for both researchers and users, so more users can access and reuse content, and more researchers can provide access to and reuse of their work.

---

[2] Alondra Nelson, "Ensuring Free, Immediate, and Equitable Access to Federally Funded Research," US Office of Science and Technology Policy, August 25, 2022.

- Consider using the following language, modeled after the Wellcome Trust language:

  > This research was funded in whole or in part by the National Institutes of Health [grant number]. For the purpose of public access, the author has applied a CC BY public copyright license to any author-accepted manuscript version arising from this submission.

  > According to cOAlition S funders, "In the two years or so since this [rights retention] approach was introduced by many cOAlition S funders, [the funders] are only aware of one example where a publisher rejected a manuscript due to the existence of a prior licence."[3]

- Develop a mechanism to ensure that funds are available post-closeout for publication expenses. Post-award publication funding may be particularly important for early-career, postdoctoral, and graduate student researchers whose publication costs may not have been factored into the original grant budget.

- Consider additional supplemental funding or new grant models to support innovative institutional services for investigators in meeting public-access requirements. ARL member institutions and their libraries help investigators navigate the various publishing options, manuscript versions, publisher policies, and the differences between public-access publishing and repository deposit.

2. **Steps for improving equity in access and accessibility of publications**

   ARL recommends:

   - Encouraging open licenses (see above), which allow use of content on assistive devices as well as enabling text and data mining

   - Requiring that all deposited manuscripts or final publications meet Web Content Accessibility Guidelines (WCAG) and Section 508 compliance standards, so publications can be properly rendered to assistive technologies

3. **Methods for monitoring evolving costs and impacts on affected communities**

   Fully monitoring publication expenses will require looking beyond the grant budget line item for publication costs. Given the different mechanisms for funding publication costs (grant-based, departmental, library funds, and bundled read-and-publish agreements), the single budget line item does not entirely reflect the full range of expenses.

---

[3] "Making Full and Immediate Open Access a Reality," cOAlition S, April 11, 2023.

ARL recommends:

- Surveying researchers and/or institutions at closeout for additional information on publication costs, or commissioning a study that would incorporate both researcher costs and additional data from global registries of article-processing charges (APCs) and other publication fees

- Monitoring publication trends across publication formats, including journal articles, book chapters, and other peer-reviewed publications

- Reviewing the publication costs of journal titles that NIH-supported researchers most commonly publish in

4. Early input on considerations to increase findability and transparency of research

The Association of Research Libraries recommends that NIH:

- Adopt the *Implementing Effective Data Practices* report recommendations from higher education associations,[4] including the adoption of the following persistent identifiers (PIDs) at a minimum:

  - Digital object identifiers (DOIs) for each publication and research output (data, code, software, etc.)
  - Open researcher and contributor identifiers (ORCID IDs) to uniquely identify authors
  - Research Organization Registry (ROR) IDs to link authors with known organizations
  - Crossref Funder Registry IDs to associate a research output with a granting agency
  - Crossref Grant IDs to uniquely identify a research award with an author, an organization, and a funding agency

  This report also provided considerations that would help support this necessary PID infrastructure. NIH could lead the following to advance the sharing of research and research data.

  - NIH, in coordination and harmonization with other federal agencies, could fund the design and development of tools and services to support the use of PIDs. NIH could fund investigators developing research-related workflows and systems that enable the collection of PIDs, storage of PID

---

[4] *Implementing Effective Data Practices: Stakeholder Recommendations for Collaborative Research Support*, Association of Research Libraries (ARL), California Digital Library, Association of American Universities (AAU), and Association of Public and Land-grant Universities (APLU), September 23, 2020.

metadata, and connections to PIDs in other systems.

- o NIH, in coordination and harmonization with other federal agencies, could invest in infrastructure and initiatives that support the use of PIDs by supporting member organizations that promote open scholarly infrastructure, such as Crossref, DataCite, and ORCID; funding organizations and data repositories that follow best practices for FAIR (findable, accessible, interoperable, and reusable) data; and supporting community-led initiatives such as the Research Organization Registry and DMPTool.

- o NIH, in coordination and harmonization with other federal agencies, could minimize the burden on researchers by making it easy and seamless for researchers to use PIDs by designing workflows and systems to assign and collect them automatically and by supporting PID services or data repositories within the PubMed Central platform. Finally, NIH could work with vendors of tools to require them to adopt workflows and software that automatically collect PIDs. This will be especially necessary for less-resourced institutions that may not have research librarians to provide these services.

We look forward to continued engagement with the NIH during the development of the agency's public access plan. We are happy to work with the NIH to identify ARL member institutions to participate in conversations regarding any of these specific topics. Please feel free to contact me or my colleague Cynthia Hudson Vitale, Director of Science Policy and Scholarship, (cvitale@arl.org) with any questions about these comments.

Sincerely,

Mary Lee Kennedy
Executive Director